



American College of Emergency Physicians
International Trauma Life Support 2019
ITLS REGISTRATION FORM



International Trauma Life Support Courses gives you the knowledge and hands-on skills to take better care of trauma patients. The ITLS framework is a global standard that enables you to master the latest techniques in rapid assessment, appropriate intervention and identification of immediate life-threatening injuries.

PLEASE PRINT LEGIBLY!

Name: _____ Course Type: Advanced Basic
Telephone: (H) _____ (C): _____
Address: _____ City: _____ State: _____ Zip: _____
E-mail Address: _____
Agency Affiliation _____

Check (Payable to PAEMS Office)
 Master Card Visa Discover Account Number _____ Exp. Date _____

Signature _____

Please check:

Provider Course

- Wednesday & Thursday, February 6 & 7, 2019
8:00AM – 5:00PM
 Wednesday & Thursday, June 5 & 6, 2019
8:00 AM – 5:00 PM
 Wednesday & Thursday, October 16 & 17, 2019
8:00 AM – 5:00 PM

Renewal Course

- Tuesday, February 5, 2019
8:00AM – 5:00PM
 Tuesday, June 4, 2019
8:00AM – 5:00PM
 Tuesday, October 15, 2019
8:00AM – 5:00PM

Expiration Date: _____

Course Fee: Provider Course: \$160.00
Renewal Course: \$130.00

(Payment includes ITLS Provider Manual)
Renewals must have a current ITLS card

Please return completed registration form to:

OSF Healthcare Saint Francis Medical Center
PAEMS Office
530 NE Glen Oak Ave.
Peoria, Illinois 61637 Phone: (309) 624-4638 FAX: (309) 655-2090

Course Location:

PAEMS Office
304 E. Illinois Ave
Peoria, Illinois 61603 For additional information, call (309) 624-4638 or email Danelle.a.geraci@osfhealthcare.org

Registration: Registration deadline is two weeks prior to class date.

Pre-course materials will be mailed prior to course. Contact The PAEMS Office if you have not received the pre-course packet at least 2 weeks prior to class.

Books: You MUST have a student textbook/handbook to complete pre-course requirements, including the pre-test.

- I have my own book. I am enclosing payment to cover the cost of the course only. (Deduct \$60.00)

Registrant Signature Date